

**COMPOST PLANT PERMIT APPLICATION**

Nevada Division of Environmental Protection  
Solid Waste Branch

**PERMIT EXEMPTIONS:** The following facilities are exempt from the requirement to obtain a permit:

- Municipal compost plants for yard waste
  - On-Farm composting, if the facility:
    1. Does not use any feedstock materials other than agricultural wastes such as manures or crop residues, and
    2. The compost produced will not be sold or otherwise purveyed to the public.
  - Composting bins operated at personal residences for personal use.
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**NOTE: Sewage sludge (biosolids) composting** - Applicants for facilities that accept sewage sludge for composting must apply through the Bureau of Water Pollution Control of the Nevada Division of Environmental Protection. Call (775) 687-9418.

**Instructions:** Complete Sections I & II, attach the supporting information described in Section III, and sign Section IV.

**Section I. Applicant Information**

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1. Land Owner

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

2. Operator

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

3. Authorized Agent

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

## **Section II. Facility Information**

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### 1. Location

Name: \_\_\_\_\_

County: \_\_\_\_\_ Town/Range/Sec: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: \_\_\_\_\_

2. Type of process: ☐ Windrow ☐ Static pile ☐ In-vessel ☐ Other: \_\_\_\_\_

### 3. Sectors Which Generate Feedstock Materials:

☐ Residential ☐ Commercial ☐ Industrial ☐ Agricultural

### 4. Sectors to Use Products:

☐ Residential ☐ Commercial ☐ Industrial ☐ Agricultural

5. Provide a general location map showing land use and zoning within 1 mile of the compost plant and distance to nearest public road.

## **Section III. Supporting Information**

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### Report of Design/Operating Plan

Include:

1.
  - a. A description of materials to be composted, including waste characterization sufficient to evaluate the potential for biological or chemical contaminant migration in the event of a release;
  - b. A plant layout diagram showing property boundaries, fencing, roads, principal processing equipment, storage areas for stockpiles of incoming materials and intermediate and final products;
  - c. A description of the equipment and personnel necessary to operate the plant;
  - d. A process description with a schematic diagram that shows loading and unloading areas, and traffic flow routing;
  - e. The maximum inventory by volume of feedstocks, intermediate materials and products;
  - f. Proposed product specifications and a program to verify conformance with the specifications;
  - g. A program for monitoring process parameters, including moisture content and temperature;
  - h. A description of the final use for the compost or the available markets;
  - i. Provisions for fire prevention and control;
  - j. Provisions for odor prevention and control;
  - k. Provisions for the control of runoff and runoff;
  - l. Provisions for litter prevention and control;
  - m. Contingency plans to be taken in the event of unforeseen circumstances that may occur at the facility. The plans shall provide for an organized and coordinated course of action to be taken,

and must address:

- (1) A fire at the facility;
- (2) A release of hazardous or toxic materials;
- (3) Facility shutdown for any reason.

n. Provisions for proper disposal of by-products.

2. For facilities that produce compost for sale, how the following standards will be met (feedstock knowledge and/or sampling protocol):
  - a. Must meet the requirements relating to the maximum allowable density of fecal coliform or Salmonella sp. bacteria for Class A sewage sludge as set forth in 40 Code of Federal Regulations, §503.32(a);
  - b. Must not reheat upon standing;
  - c. Must be innocuous; and
  - d. Must contain no sharp particles which could cause injury to persons handling the compost.

#### **Section IV. Certification**

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1. I certify that I am familiar with the information contained in the application and I believe that the information provided in this application is complete and accurate.

\_\_\_\_\_  
Printed Name of Owner

\_\_\_\_\_  
Title or Authority of Signatory

\_\_\_\_\_  
Legal Signature

\_\_\_\_\_  
Date of Signing

2. Send the completed application and supporting information to:

Nevada Division of Environmental Protection  
Bureau of Waste Management/Solid Waste Branch  
333 W. Nye Lane, Room 138  
Carson City, NV 89706-0851

For more information please call (775) 687-9472.